

The symptoms of dementia præcox, especially the catatonic manifestations, are believed to be due to these lesions. The author has demonstrated that when the lesions were situated in extra-cortical and extra-pyramidal areas the symptoms of catatonia were more marked.

Attention is also again drawn to the author's "black reaction," produced by heating the urine with silver nitrate, and due to the presence of abnormal substances (? amines). The reaction is said to be positive in all forms of confusional insanity, and in about 80% of early cases of dementia præcox, especially of the catatonic type.

The author holds the opinion that a particular micro-organism forms toxins in the lower intestine, and as a consequence of bowel lesions, or an abnormal permeability of the mucosa, these toxins eventually have a damaging effect on a nervous system already predisposed, and cause the cerebral lesions described.

J. R. BEITH ROBB.

The Boltz (A.A.S.) Test in Cerebro-spinal Fluid. (Amer. Journ. Psychiat., September, 1930.) Walker, B. S., and Sleeper, F. H.

The reaction is not specifically diagnostic for neurosyphilis. As a means for rapid estimation of the protein in the spinal fluid it is of definite value. It is very doubtful if the test can ever be made really quantitative. But where there is no time or equipment for the more elaborate methods, it supplies a convenient approximation.

M. HAMBLIN SMITH.

The Takata-Ara Colloidal Test with Spinal Fluid. (Arch. of Neur. and Psychiat., October, 1930.) Karnosh, L. J., and King, H. H.

The authors conclude that the test is not highly specific. It is positive in about 82% of cases of metasyphilis. It is frequently positive in non-syphilitic organic conditions, such as cerebral arterio-sclerosis, brain trauma and tumour.

G. W. T. H. FLEMING.

Hyaline Degeneration in Dementia Paralytica. (Arch. of Neur. and Psychiat., July, 1930.) Wolf, A.

The author presents a case of general paralysis, which at autopsy showed a translucent area of almost cartilaginous hardness in the upper portion of the left precentral gyrus. Similar smaller areas were found in various regions of the brain-stem, both occipital lobes, second left temporal gyrus, both gyri recti and the thalamus. The author concludes that there is a disturbance of protein metabolism in dementia paralytica, and that diseased nervous tissues contain proteolytic ferments. During the deposition of hyaline material, the vessel-walls form the first barrier and are the first site of deposition. After breaking down of the vascular defence, the second defence mechanism is a ring of inflammation and reaction of macroglia. The nervous and supporting elements are gradually destroyed by the pressure of the hyaline, which is partly absorbed,

giving rise to a *status spongiosus*. A connective-tissue framework arising from the blood-vessels forms a supporting structure for the degenerated areas.

G. W. T. H. FLEMING.

Sedimentation Rate of Red Cells in Malarial Therapy. (*Riv. Speriment. di Freniatria*, liv, 3, September, 1930.) *Benvenuti, M.*

The author has investigated the sedimentation rate in general paralysis and in non-paretic syphilis. He regards the increased sedimentation rate which occurs in the former as an aid to differentiation from the latter. The sedimentation rate in general paralysis, often high before malarial treatment, may reach a very high level during such treatment. On occasion malarial therapy brings the sedimentation rate to normal.

H. W. EDDISON.

The Blood Electrolyte Changes in Narcosis, with Special Reference to Calcium and Potassium. (*Arch. of Neur. and Psychiat.*, September, 1930.) *Katzenelbogen, S.*

The author investigated the blood chemistry in rabbits under narcosis induced by ether in 10 animals, and by dial in 58 experiments on 41 animals. He found no significant modifications in the CO₂-combining power or the phosphorus or magnesium contents. Potassium does not behave in a characteristic manner in narcosis, but there is always a decrease in calcium. There is a distinct relation between the rate of the decrease of calcium and the duration of sleep. In 14 out of 15 experiments the longer the sleep the greater the decrease of the calcium.

G. W. T. H. FLEMING.

Comment on the Mechanism of Narcolepsy. (*Journ. of Nerv. and Ment. Dis.*, October, 1930.) *Wagner, C. P.*

The author summarizes briefly the literature on narcolepsy and describes two cases of his own. One case showed both sleep and cataplectic attacks, and the other cataplectic attacks only. In his first case the author was able to produce a cataplectic attack by an intravenous injection of afenil (a preparation of calcium chloride and urea). This patient's blood calcium, which had been 11 mgrm. per 100 c.c. of blood, was 16.5 mgrm. at the end of five minutes after the injection; in the healthy subject the figure should have returned to normal. Wagner thinks that there may be a momentary hypercalcæmia during a cataplectic attack which reduces muscle irritability to the extent of complete loss of muscle tonus. If calcium balance is controlled by an area in the floor of the third ventricle, may not a lesion in this region, by producing a disturbance of calcium balance, be responsible for the sleep and the cataplectic attacks?

G. W. T. H. FLEMING.

The Incidence of Fever and Leucocytosis in Multiple Sclerosis. (*Arch. of Neur. and Psychiat.*, September, 1930.) *McKenna, J. B.*

The author studied the records of 109 verified cases of multiple sclerosis with reference to changes in temperature, leucocyte count